

APPENDIX 5

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD LOS ANGELES REGION

NOTICE OF INTENT TO COMPLY WITH ORDER NO. R4-2005-XXXX CONDITIONAL WAIVER OF WASTE DISCHARGE REQUIREMENTS FOR DISCHARGES FROM IRRIGATED LANDS FOR INDIVIDUAL DISCHARGER

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1. Individual Discharger Information

Discharger Name:			
Facility Name ¹			
Physical Address:			
City:	County:	Zip:	Phone:
Mailing Address			
City	State	Zip	
Contact Person:			

2. Billing Address (if different from above)

Name:			
Street Address:			
City:	County:	Zip:	Phone:
Contact Person:			

3. Site Information²

Street Address:		
City:	County:	Total size of site (acres):
Assessor's Parcel Number:	Closest Surface Water and Distance:	
Township and Range:		

¹ Facilities include lands where water is applied for the purpose of producing crops and includes commercial nurseries, and nursery stock production.

² Attach a scale map (including property boundary and discharge area) and vicinity map (showing location in relationship to major road intersections, lot and tract boundaries, etc.

1. ☐ Low Risk³
2. ☐ Typical

1) Is all irrigation by drip-tape or line, mini sprinklers, or other water-saving device?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2) Are fertilizer application volumes documented to be no more than the nitrogen requirements as determined by methodology proposed by the Discharger and approved by the Executive Officer?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3) Is pesticide application performed in accordance with Integrated Pest Management Guidelines provided by University of California Cooperative Extension or the National Resource Conservation Service?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4) Does the irrigated land have at least a 50-foot setback from any water body or wetlands or is it separated from that waterbody by buffer strips?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5) Was irrigation runoff observed during the most recent year, except for storm runoff?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6) Have pesticides listed for the watershed on the most recent 303(d) list been used?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
7) Is sediment retained on the property (even during storms) by filter strips, buffer zones, retention basins, or other management practices?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8) Are tile drains in use?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
9) Is the discharge impounded or treated, and/or is it documented to meet all WQOs, TMDL load reductions and CTR?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

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TENTATIVE

Describe other management practices in place which may mitigate contamination of water by fertilizer, pesticide, storm water, tile drain or tail water discharges

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7. Filing Fee

Annual fee is not required at this time and shall be determined after the State Board adopts a fee schedule for waiver.

8. Certification

"I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment." In addition, I certify that the provisions of the Conditional Waiver and the Monitoring and Reporting Program, will be complied with.

Printed Name: _____ Title: _____

Signature: _____ Date: _____